



VERMONT DEPARTMENT OF PUBLIC SAFETY
DIVISION OF FIRE SAFETY
Office of the State Fire Marshal, State Fire Academy and State Haz-Mat Team
firesafety.vermont.gov



TQP Inspection Report

Return this completed form to the appropriate Regional Office

☐ **Barre Regional Office**

1311 US RTE 302, Suite 500
Barre, VT 05641
Phone: (802) 479-4434
Fax: (802) 479-4446

☐ **Rutland Regional Office**

56 Howe Street, Building A, Ste 200
Rutland, VT 05701
Phone: (802) 786-5867
Fax: (802) 786-5872

☐ **Springfield Regional Office**

100 Mineral Street, Suite 307
Springfield, VT 05156-3168
Phone: (802) 885-8883
Fax: (802) 885-8885

☐ **Williston Regional Office**

372 Hurricane Lane, Suite 102
Williston, VT 05496
Phone: (802) 879-2300
Fax: (802) 879-2312

VT State ID

TQP Certification No.

Employer ID*

Sticker No.

Inspection Date

Name of Building: _____ Site #: _____

911 / or Physical

Address: _____

Town: _____ Zip Code: _____

Owner: _____	Telephone: _____
Owner's Address: _____ State _____	Zip Code: _____

Inspection type: ☐ Fire Alarm ☐ Suppression ☐ Sprinkler ☐ Generator

If an ID sticker is being removed or replaced provide the inactive VT State ID number: _____

Inspector Name (print): _____ Employer: _____

Signature of Inspector: _____

AFFIX ID STICKER HERE FOR NEW OBJECTS

Violations Noted: ☐ Yes ☐ No (please use additional pages as necessary)

* This ID is not your employer's federal tax ID, it is assigned by the Department - please contact the Department if you are unsure of what number your employer has been assigned.

- A copy of this inspection report must be forwarded to the Regional Office within 14 working days.
- This report does not relieve the Inspection Company of keeping and maintaining the reports required by NFPA.